

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718359

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** THE OPPORTUNITY CENTER, INC.

**Current Principal Place of Business:**

310 N. CLYDE AVE  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

310 N. CLYDE AVE  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 23-7063820

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAIN, SHERRY L  
310 NORTH CLYDE AVE  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** PHILLIPS, CHARLENE M  
**Address:** 2235 WOODSIDE WAY  
**City-St-Zip:** KISSIMMEE, FL 34744

**Title:** S  
**Name:** HINSON, ROBIN  
**Address:** 3423 WILDERNESS TRAIL  
**City-St-Zip:** KISSIMMEE, FL 34746

**Title:** VP  
**Name:** ANDERSON, SHERYL  
**Address:** 3423 VILLAGE GREEN COURT  
**City-St-Zip:** ST. CLOUD, FL 34772

**Title:** T  
**Name:** CARRION, PORTIA  
**Address:** 2713 RISMEN COURT  
**City-St-Zip:** KISSIMMEE, FL 34743

**Title:** D  
**Name:** KOCK, ANDRAE  
**Address:** 1215 CARSON AVENUE  
**City-St-Zip:** KISSIMMEE, FL 34744

**Title:** P  
**Name:** LACKEY, STEVE  
**Address:** 2003 WESTWOOD CIRCLE  
**City-St-Zip:** KISSIMMEE, FL 34746

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SHERRY L. CAIN

ED

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date